Docket No.: DT-4060

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		LOW FRICTION FABRIC	
the specification	on of whic	ch (check only one item below):	
	[x]	is attached hereto.	
	[]	was filed as United States application	
Serial No			
		on	
		and was amended	
		on	(if applicable).
		[] was filed as PCT international application	
		Number	
		on	
		and was amended under PCT Article 19	
		on	(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code § 119, of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) for which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:					
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING CLAIM (day, month, year) UNDER 35 U			
		•	□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		
			□ YES □ NO		

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

	U.S. APPLICATIONS		ST	ATUS (Check o	ne)
U.S. Application	on Number	U.S. Filing Date	Patented	Pending	Abandoneo
					-
PCT AP	PLICATIONS DESIGNATING	3 THE U.S.			
PCT Application No.	PCT Filing Date	U.S. Serial Numbers Assigned (if any)			

POWER OF ATTORNEY: As a named inventor(s), I/we hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

**David Toren** Ronit Gillon

Reg. No. 19,468 Reg. No. 39,202

Alexander Zinchuk Paul Scott Direct Telephone Calls to: Reg. No. 30,541 Reg. No. 47,071

Send Correspondence To: David Toren, Esquire Intellectual Property Group Sidley Austin Brown & Wood, L.L.P. 375 Third Avenue New York, New York 10022

David Toren, Esquire Intellectual Property Group Sidley Austin Brown & Wood, L.L.P (212) 906-2585

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2 0 1	OF INVENTOR	Metzger	Michael	B.
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Towson	Maryland	United States of America
		POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS	110 West Road Suite 227	Maryland	United States of America
		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2 0 2	FULL NAME OF INVENTOR			
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
		POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	POST OFFICE ADDRESS			
		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2 0 3	FULL NAME OF INVENTOR			
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP			
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE